RECEIVED

FORM 1	ORGANIZATION			Office Use O	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4N		IL CENTER
Student Voice	ce Project				
ADDRESS (number and s	P.O. Box 289	97			
(Check if addler is changed)	Richland		WA	99302	
	•	CITY	STATE	ZIP	CODE
COMMITTEE'S E-MAIL (Check if add is changed)	ADDRESS (Please provide only one jCOStanzo@9	•			
COMMITTEE'S WEB PA	www.studen	trepresentation.	org		
2. DATE <b>07</b>	18 2012				
3. FEC IDENTIFICAT	TION NUMBER C	00524090			
4. IS THIS STATEMEN	NT NEW (N) OR	AMENDED (A)			
I certify that I have examine the second of Type or Print Name of T	nined this Statement and to the bearing and to the bearing and		f it is true, corr	ect and complet	ө.
Signature of Treasurer	The Contract of the Contract o	<b>&gt;</b>	Date 0	7 18	2012
NOTE: Submission of fals	e, erroneous, or incomplete information	on may subject the person signin	-	•	of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Comm Toll Free 800-424-9530 Local 202-694-1100			FORM 1 d 02/2009)

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	FEC	For	m 1 (Revised 02/2009)	Page 2			
5.	TYPE O	)F C	MMITTEE				
	Candio	date	Committee:				
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
	(b) [		This committee is an authorized committee, and is NOT a principal campaign committee. (Co information below.)	mplete the candidate			
	Name of Candida	-					
	Candida Party Af		Office Sought: House Senate President	State			
	-	_		District			
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name of Candidat						
	Party (	Com	mittee:				
	(d) [		(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
	Politica	al A	ction Committee (PAC):				
	(e) [		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	onnected organization is a:			
			Corporation Corporation w/o Capital Stock	Labor Organization			
			Membership Organization Trade Association	Cooperative			
			In addition, this committee is a Lobbyist/Registraer PAC.				
	(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party			
			In addition, this committee is a Lobbyist/Registrant PAC.				
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
	Joint F	und	raising Representative:				
	(g)	]	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate				
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political			
	C	Com	mittees Participating in Joint Fundraiser				
	1	۱.	FEC ID number C	•			
	2	2.	FEC ID number C				
	3	3.	FEC ID number C				
	4	١.	. FEC ID number C				

FEC Form 1 (Revis	sed 02/2009)		Page 3
Write or Type Committee N	lame		
i. Name of Any Connect	ed Organization, Affiliated Committee,	loint Fundraising Representative, or	Leadership PAC Sponsor
None			
Mailing Address		•	
·	CITY	STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee	Joint Fundralsing Representative	Leadership PAC Sponso
Custodian of Records: books and records.	Identify by name, address (phone number	r optional) and position of the person	on in possession of committe
Full Name Jaro	ed M Costanzo		
Mailing Address	P.O. Box 2897		
	Pasco	WA	99302
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number 509	460 0643
Treasurer: List the name any designated agent (e.	e and address (phone number optional) g., assistant treasurer).	of the treasurer of the committee; an	d the name and address of
Full Name Jaro	ed M Costanzo		
Mailing Address	P.O. Box 2897		
	Pasco	WA	99302
Title or Position	СПУ	STATE	ZIP CODE
Treasurer and Pre	esident	Telephone number 509	460 0643

FEC Form 1 (R	tevised 0.2/2009)		Page 4		
Full Name of Designated Agent Mailing Address			·		
Title or Position	CITY	STATE Telephone number	ZIP CODE		
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.					
Mailing Address	po Community Credit Union 4902 Road 68	·			
	Pasco	WA	99302		
	CITY	STATE	ZIP CODE		
Name of Bank, Deposi	tory, etc.				

CITY

STATE

ZIP CODE

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.					
Hand Delivered	Date of Receipt				
USPS First Class Mail	Postmarked 7/18/12				
USPS Registered/Certified	Postmarked (R/C)				
USPS Priority Mail	Postmarked				
Delivery Confirmation™ or Signature Confirmation™ Label					
USPS Express Mail	Postmarked				
Postmark Illegible					
No Postmark	-				
Overnight Delivery Service (Specify):	Shipping Date				
Next Busin	ess Day Delivery				
Received from House Records & Registration Office	Date of Receipt				
Received from Senate Public Records Office	Date of Receipt				
Received from Electronic Filing Office	Date of Receipt				
Other (Specify):	Receipt or Postmarked				
	7/24/12				
(3/2005)	DATE PREPARED				
•					